

**IN THE CLAIMS**

Please add new claim 47:

Claims 1-29 (canceled)

30. (Original) A lower urinary tract symptoms diagnostic method comprising the steps of:

- a. supporting a prostatic urethra;
- b. sequentially and incrementally returning portions of the prostatic urethra to an unsupported condition during a bladder voiding event; and,
- c. visually assessing fluid flow associated with said sequential and incremental return of portions of the prostatic urethra to an unsupported condition.

31. (Original) The method of claim 30 wherein linear relationships among the structures of the lower urinary tract are ascertained during said sequential and incremental return of portions of the prostatic urethra to an unsupported condition.

32. (Original) The method of claim 31 further comprising the step of ascertaining pressure corresponding to said fluid flow.

33. (Original) The method of claim 32 further comprising the step

of obtaining a casting of the prostatic urethra.

34. (Previously presented) A bladder outlet obstruction diagnostic methodology comprising the steps of:

- a. positioning an indwelling device for selective support of a prostatic urethra; and,
- b. manipulating a portion of said indwelling device so as to permit a prostate to physiologically act upon a prostatic responsive segment of said indwelling device.

35. (Previously presented) The method of claim 34 wherein said manipulating permits sequential assessment of prostatic urethra patency.

36. (Previously presented) The method of claim 35 wherein said manipulating permits incremental assessment of prostatic urethra patency.

37. (Previously presented) The method of claim 34 wherein said indwelling device is adapted to receive a casting agent in furtherance of obtaining a casting of a prostatic urethra.

38. (Previously presented) The method of claim 37 further comprising obtaining a casting of the prostatic urethra.

39. (Previously presented) The method of claim 34 further comprising monitoring urine flow during said manipulating.

40. (Previously presented) The method of claim 39 wherein said monitoring comprises visual assessment of said urine flow character.

41. (Previously presented) The method of claim 39 wherein said monitoring comprises pressure indication.

42. (Previously presented) The method of claim 39 wherein said monitoring comprises pressure indication and recording.

43. (Previously presented) A lower urinary tract diagnostic method comprising the steps of:

- a. providing a diagnostic assembly comprising an elongate support member reversibly receivable within an elongate body for selective support of said elongate body, said elongate body including a physiologically responsive flexible wall segment for traversing a prostatic urethra;
- b. sequentially and incrementally retracting said elongate support member from said physiologically responsive flexible wall segment;
- c. assessing urine discharge associated with said sequential

and incremental retraction of said elongate support member.

44. (Previously presented) The method of claim 43 wherein the step of assessing urine discharge comprises quantification of discharge pressure.

45. (Previously presented) The method of claim 44 wherein the step of assessing urine discharge further comprises quantification of discharge volume.

46. (Previously presented) The method of claim 43 wherein the step of assessing urine discharge comprises quantification of discharge volume.

47. (New) A lower urinary tract diagnostic method comprising the steps of:

- a. providing a diagnostic urethral device comprising a physiologically responsive flexible wall segment and a proximal end portion adapted to be anchored at a bladder neck of a lower urinary tract for urine ingress such that said physiologically responsive flexible wall segment of the device transverses a prostatic urethra in furtherance of assessing prostate contribution to bladder outlet obstruction;
- b. further providing an elongate support member for

substantial receipt within and selective, sequential withdrawal from within a lumen of said diagnostic urethral device in furtherance of permitting physiologically action upon said physiologically responsive flexible wall segment of said diagnostic urethral device; and,

c. assessing urodynamic parameters during selective, sequential withdrawal of said elongate support member from said lumen of said diagnostic urethral device.